| Docket | No. |
|--------|-----|
| 3.0-0  | 01  |

## **Declaration and Power of Attorney For Patent Application**

## **English Language Declaration**

As a below named inventor, I hereby declare that:

| My residence, post office address and ci  | tizenship are as stated below next to m   | ny name,  |
|---|---|---|
| I believe I am the original, first and sole i first and joint inventor (if plural names at which a patent is sought on the invention KEYLESS LOCKING DEVICE   | re listed below) of the subject matter w  | w) or an original,<br>hich is claimed and for                         |
| the specification of which  |   |   |
| (check one)   |   |   |
| Application Number  | as United States Application No   |   |
| and was amended on  | (if applicable)   |   |
| I hereby state that I have reviewed and including the claims, as amended by any   | understand the contents of the above amendment referred to above.   |   |
| I acknowledge the duty to disclose information, including for continuation-in-part between the filing date of the prior application.  | applications, material information when   | hich became available   |
| I hereby claim foreign priority benefits application(s) for patent, or plant breed application which designated at least of below and have also identified below inventor's or plant breeder's rights certified before that of the application on who | der's rights certificate(s), or 365(a) of<br>one country other than the United St<br>, by checking the box, any foreign<br>ficate(s), or any PCT international ap | any PCT International ates of America, listed application for patent, |
| Prior Foreign Application(s)  |   | Priority Not Claimed  |
| NONE  |   | _ ·   |
| (Number) (Country)  | (Day/Month/Year Filed   | )<br>_  |
| (Number) (Country)  | (Day/Month/Year Filed   | <del>-</del>  |
| (Number) (Country)  | (Day/Month/Year Filed   |   |

| Prior Foreign Appli | calion(s) | 1 1101                 | Try 110t Glaimed |
|---------------------|-----------|------------------------|------------------|
| NONE                |           |                        |                  |
| (Number)            | (Country) | (Day/Month/Year Filed) |                  |
|                     |           |                        |                  |
| (Number)            | (Country) | (Day/Month/Year Filed) |                  |
|                     |           |                        |                  |
| (Number)            | (Country) | (Day/Month/Year Filed) |                  |
|                     |           |                        |                  |

| None   | None  |   |
|--|---|---|
| (Application Serial No.)   | (Filing Date)   |   |
| (Application Serial No.)   | (Filing Date)   |   |
| (Application Serial No.)   | (Filing Date)   |   |
| U.S.C. Section 112, Tacknowledge<br>Office all information known to me | e the duty to disclose to the U<br>e to be material to patentabili<br>ble between the filing date of th | ovided by the first paragraph of 3<br>Inited States Patent and Trademar<br>ty as defined in Title 37, C. F. R<br>ne prior application and the nationa |
| NONE (Application Serial No.)  | (Filing Date)   | (Status) (patented, pending, abandoned)   |
|  | (Filing Date)   | (Status) (patented, pending, abandoned)   |
| (Application Serial No.)   |   |   |
| (Application Serial No.)  (Application Serial No.)                     | (Filing Date)   | (Status) (patented, pending, abandoned)   |

| POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (list name and registration number)  Michael E. Zall Reg. No. 27,023 |
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| Full name of second inventor, if any  |
| Second inventor's signature Date  |
| Residence   |
| Citizenship   |
|   |
| Post Office Address   |
|   |

| VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS - INDEPENDENT INVENTOR |  |  |   | Docket No.<br>3.0-001   |                               |  |
|--|--|--|---|---|-------------------------------|--|
| Serial   | No.  | Filing Dat   | e   | Patent No.  |                               | Issue Date                                     |
| Applicant/ Da<br>Patentee:   | vid J. Haas  |  |   |   |                               |  |
| Invention: K   | EYLESS LO  | CKING DEVICE   |   |   |                               |  |
| for purposes   | of paying red  | uced fees under se   | ction 41(a                                | ify as a small entity person as<br>) and (b) of Title 35, United Sta<br>ove and described in:   | defined<br>ates Co            | in 37 CFR 1.27(a)(1)<br>ode, to the Patent and |
| ☐ the  | specification  | to be filed herewith.  |   |   |                               |  |
| the  | application id   | entified above.  |   |   |                               |  |
| ☐ the  | patent identif   | ied above.   |   |   |                               | •  |
| grant, convey who could not Each person,   | or license, a be classified concern or   | ny rights in the inve<br>as a small entity ur<br>organization to whi | ention to ar<br>nder section<br>ch I have | d am under no obligation und<br>ny person, small business conc<br>n 41(a) and (b) of Title 35, Unite<br>assigned, granted, conveyed,<br>or license any rights in the inve | ern, or<br>ed Stat<br>or lice | es Code.  ensed or am under an                 |
| ⊠ Nos<br>□ Eacl  | such person, on the such person to such person to such person to such person to such the such that t | concern or organiza<br>n, concern or organi                          | ition exists<br>zation is li<br>are recom | sted below.<br>mended from each named pel   |                               |  |
| FULL NAME  |  |  |   |   |                               |  |
| ADDRESS  | 4  | Individual   |   | all Business Concern  |                               | Nonprofit Organization                         |
| FULL NAME<br>ADDRESS   |  | Individual   |   | all Business Concern  |                               | Nonprofit Organization                         |
| FULL NAME<br>ADDRESS   |  |  |   | all Business Concern  |                               | Nonprofit Organization                         |
| FULL NAME<br>ADDRESS   | _  | Individual   |   | an business concern   |                               |  |
| , 15511200   |  | Individual   | ☐ Sma                                     | all Business Concern  |                               | Nonprofit Organization                         |

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.27(g)(2))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

| NAME OF INVENTOR David J. Haas SIGNATURE OF INVENTOR | DATE: | 9/18/2003 |
|--|-------|-----------|
| NAME OF INVENTOR                                     |       |           |
| SIGNATURE OF INVENTOR                                | DATE: |           |
| NAME OF INVENTOR                                     |       |           |
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| SIGNATURE OF INVERTOR                                |       |           |
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| SIGNATURE OF INVENTOR                                | DATE: |           |
|  |       |           |
| NAME OF INVENTOR                                     | 5.475 |           |
| SIGNATURE OF INVENTOR                                | DATE: |           |